



12285 Patterson Ave.
Richmond, VA 23238
Ph. 804-784-9050
Fax 804-784-9005

REQUEST FOR TRANSCRIPT

In order to forward or request a transcript or other school records to or from any school of prospective students, we are required to have written permission.

I hereby give my permission for:

Name of Former School

Street Address

City, State, Zip

To release all records pertaining to:

Student's Name (PRINT)

Class Year

And to forward those records to:

SHAAREI TORAH OF RICHMOND
12285 PATTERSON AVENUE

RICHMOND, VA 23238

Please forward all official transcripts to include Physical Examination and Immunization records, Grading records, etc.

Parent or Guardian

Date

Date sent to former school